

Program Registration Form

To accept registrations for you and your family members, we must first set up your "household" in our computer. You only need to set up your household once. Please inform us any time your household information changes.

Household Set-Up (if y	ou already have a ho	usehold in our sy	vstem, skip	below to Regist	ration Info)
Head of Household:					
First Name: Last Name:					Gender: M/F
Birthdate:/ Email address:					
Address:					
City: State: Zip:					
Home Phone: () Work Phone: ()					
Emergency Phone: () Cell Phone: ()					
Additional Family Mem	bers:				
First Name	Last Name	Gender M/F	Grade	Birth Date	Relationship
Registration Informatio	n			Household #:	
First Name	Last Name	Program		Code #	Fee
Total Due:					\$
Method of Payment:	CashCheck	MasterCardV	isaDisc	over	
		/_			
Card Number		Exp. Date			
Name as printed on card:		Signature:			
Please make s	sure to include a valid er	mail address above	e so that we	can email you a r	eceipt!

Return completed form to: New Haven Parks and Recreation Department; PO Box 157; New Haven, IN 46774